IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.:	10/666,579) Confirmation No.: 9166
Applicant:	Kahle et al	\
Filed:	September 17, 2003	
TC/A.U.:	3732	<u> </u>
Examiner:	Grace SC Doe)
Docket No.:	A-2845-AL)
Customer No.:	21378))

Date of Electronic Filing July 6, 2006

I hereby certify that the following documents, as identified below, are being electronically filed by EFS-Web to the United States Patent and Trademark office on the above date.

- 1. Information Disclosure Statement;
- 2. Form PTO/SB/08A;
- 3. Form PTO/SB/08B;
- 4. Copies of 26 references; and
- 5. Fee transmittal.

Respectfully submitted,

Barbara Johnson 6

Applied Medical Resources

Bachaca Johnson

CUSTOMER NO.: 21378

Telephone: (949) 713-8000 IP Facsimile: (949) 713-8206

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Date

5, 2006

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H R 4818) 10/666.579 Application Number TRANSMITTAL September 17, 2003 Filing Date For FY 2005 First Named Inventor Henry Kahle Doe, Grace S.C. **Examiner Name** Applicant claims small entity status See 37 CFR 1 27 Art Unit 3732 (\$) 180.00TOTAL AMOUNT OF PAYMENT A-2845-AL Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None L Other (please identify): Deposit Account Name Applied Medical Resources Corporation ✓ Deposit Account Deposit Account Number: 01-2215 For the above-identified deposit account the Director is hereby authorized to: (check all that apply) √ Charge fee(s) indicated below Charge fee(s) indicated below except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES **EXAMINATION FEES** SEARCH FEES **Small Entity** Small Entity Small Entity **Application Type** Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 130 65 50 Plant 200 100 300 150 160 80 Reissue 300 150 500 600 250 300 Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee Description Fee (\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 180 **Total Claims** Multiple Dependent Claims Extra Claims Fee Paid (\$) Fee (\$) Fee Paid (\$) - 20 or HP = Fee (\$) HP = highest number of total claims paid for if greater than 20 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof **Total Sheets** Extra Sheets Fee (\$) Fee Paid (\$) (round up to a whole number) x - 100 ≃ 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: Information Disclosure Statement 180.00 SUBMITTED BY Registration No 53,257 Telephone 949-713-8233 Signature (Attorney/Agent)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14 This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden. and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name (Print/Type)

David G. Maidali